

Iowa Department of Human Services

Kim Reynolds Governor Adam Gregg Lt. Governor Jerry R. Foxhoven Director

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Mr. Gerd W. Clabaugh lowa Department of Public Health Co-Chairperson Gerd.clabaugh@idph.iowa.gov

Mr. David C. Hudson
Public Representative Co-Chairperson
dsmboy@hotmail.com

Dear Mr. Clabaugh and Mr. Hudson:

This letter is in response to your recent letter regarding the Medical Assistance Advisory Council (MAAC) and the Executive Committee recommendations. The Department takes all input relayed by stakeholders, members, providers, legislators, and the public seriously and is investigating the specifics of the email that was forwarded to the Department. The Department has reviewed the recommendations and has provided responses below.

Recommendation #1: Claims-related data reporting: MAAC recommends the Department clarify the reporting of metrics relating to claims which appear in the quarterly Managed Care Organization (MCO) reports. In particular, MAAC has discussed its interest in such metrics as percentage of claims that are suspended, claims suspended versus denied, the definition of suspension versus denials, and the consistency among MCOs in collecting and reporting this data.

Response: The Department is in the process of updating reporting metrics to collect data on the number of suspended claims that are paid versus denied. This reporting change will be put in place by October 1, 2018. Further, the Department welcomes the opportunity to clarify the above data elements at a future MAAC meeting.

Recommendation #2: Clearer communication regarding program changes: MAAC recommends the Iowa Medicaid Enterprise (IME) and MCOs continually work to improve communications with beneficiaries and providers relating to services, process and policy changes. For example, MAAC has received information that some beneficiaries of Long Term Services and Supports (LTSS) services receive communications about changes in service levels without clarity regarding the rationale for these changes or the recourse available to individuals in appealing these decisions. Additionally, recently MCOs were directed to recoup overpayments made to hospitals for non-emergent use of the Emergency Room without warning that a recoupment effort was underway.

Response: The Department is committed to communicating material program changes to all stakeholders, including MAAC, and has incorporated communication as a focus area for the Process Improvement Work Group. Additionally, efforts are in place between Iowa Medicaid and the MCOs to ensure communication to members is clear and concise. Depending on the timeframe of the Process Improvement Work Group progress on identifying issues in the communications to member and providers, the Department has the goal of implementing appropriate changes by the fall of 2018.

The recoveries related to non-emergent use of the Emergency Room were tied to a policy that has been in place since 2011. The MCOs have contract language with each provider that outlines the notice timeframes for overpayment recoveries. These notices occur prior to any overpayment recovery. If MAAC would like the Department and MCOs to outline this process in a future MAAC meeting, arrangements can be made to accommodate this request.

lowa Medicaid will provide an update on these recommendations to the MAAC Council in the fall of 2018.

Please feel free to contact me if you need additional information.

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Sincerely,

Jerry R. Foxhoven

Director

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